



Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

		Effectiv	ve October									
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMAL TYPE	SMALL ENTITY TYPE			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS						1	RAT	E	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			75 minus 20=		- 18		X\$	9=		OR	X\$18=	364
INDEPENDENT CLAIMS			5 minus 3 =		2		X4)=		OR	X80=	160
MUI	TIPLE DEPEND	ENT CLAIM PF	RESENT				+13	5=		OR	+270=	
* If the difference in column 1 is less than zero, ente					er "0" in c	olumn 2	TO1			OR	TOTAL	1194
		AIMS AS A (Column 1)			(Column 3)	CMAI		ENTITY	OR	OTHER SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	Me de la companya de	NUM PREV	HEST MBER IOUSLY O FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
DME	Total	AMENDMENT	Minus	**		=	X\$	9=		OR	X\$18=	
MEN	Independent	*	Minus	***		=	X4	0=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDEN				IT CLAIM		+10	35=		OR	+270=	
(Column 1) (Column 2) (Column 3)												
ENT B		CLAIMS REMAINING AFTER AMENDMENT	and and and and and and and and and and	HIC NU PRE	SHEST IMBER VIOUSLY ID FOR	PRESENT EXTRA	11	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=	_ X\$	9=		OR	X\$18=	
MEN	Independent	*	Minus	***		=	X4	10=		OR	X80=	` .
	FIRST PRESE	NTATION OF M	IULTIPLE DEF	PENDE	NT CLAIM		+1	35=		OR	+270=	,
								TOTAL T. FEE		OR	TOTA ADDIT. FEI	
		(Column 1)			lumn 2)	(Column 3	3)					1
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NI PRE	GHEST JMBER VIOUSLY AID FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
No.	Total	*	Minus	**		=	X	9=		OR	X\$18=	
MEN	Independent		Minus	***		=	X	40=		OF	X80=	
	FIRST PRESE	NULTIPLE DEPENDE		ENT CLAI	NT CLAIM ,		٥.		1	070	1.	
			n the onter in an	lume 2 ·	writo "∩" in	column 3	<u> </u>	35=	<u> </u>	OR	TOTA	
1	 If the entry in column in the "Highest Number 11 The "H	umber Previously	Paid For" IN Th	HIS SPAC	CE is less t	nan 20, enter than 3, enter "3	^{'20."} ADD	TOTA IT. FEI n the a	≣ــــــ	OF pox in a	ADDIT. FE	E

FORM PTO-875